

Public Health Service Update  
USUHS  
First Year Class  
February 29, 1984

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This was apparently an orientation lecture for the First Year Class of the Uniformed Services University of Health Sciences, and I had joined the other Surgeons General of the Armed Forces who preceded me in speaking. I pointed out that I was not one who came up through the ranks, but was a Presidential Appointee and came in at the top. Unlike the other Surgeons General, I noted, my job was subject to the dirtiest side of politics, in spite of the fact that when I was confirmed, I said that my job would be as apolitical as I could make it. I attempted to give an idea of the mission of the Public Health Service and the way that it is organized to carry out that mission. I wanted to talk about how we functioned at the time of the lecture, but also how we did things in earlier days and a few educated guesses as to what the Public Health Service might look like and how it might function in the future.

I pointed out some things obvious to the "Command", but not to the new students. The Public Health Service is a federation of five individual agencies, each with its own special brand of expertise, its own constituencies, and its own unique record of contributions to public health in this country. The Public Health Service is a non-combatant uniformed service with a proud tradition going back to 1798.

I also pointed out a huge laundry list of things that the Public Health Service did and was uniquely qualified to do, such as: medical excellence and its record as a caring and compassionate organization, our national commitment to provide quality health care to the poor and disadvantaged, the work of our Commissioned Officers in the health centers of the inner city, the rural ghettos, migrant labor camps, coal mining country, and the seacoast and waterways of America.

I mentioned the Indian Health Service and the thirty-year's record we have of staffing hospitals, clinics, and health stations serving more than 200 Indian tribes and Alaskan Native villages and some of the results thereof.

I then topped off with the function of the agencies: Alcohol, Drug Abuse, Mental Health Administration (ADAMHA), Centers for Disease Control (CDC), Food and Drug Administration (FDA), Health Resource and Service Administration (HRSA), The National Institutes of Health (NIH) with its eleven individual Institutes supporting 16,000 extramural research projects and 2,000 intramural projects each year, and finally the Office of Assistant Secretary of Health (OASH).

I closed with another list of what the Surgeon General himself does in his appointed role.

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Alaskan Natives  
"Block Grants"  
Cancer

Categorical health grant program  
Cuban and Haitian refugees  
Decrease in infant mortality  
Disease prevention, health promotion  
Elimination of Smallpox  
Epidemic of mass hysteria on the West Bank of the  
Jordan  
Genetic codes  
Heart disease  
Human Immunology  
Indian tribes  
Monoclonal hybridoma technology  
Protection against the exportation of highly  
Infectious Diseases  
Protection of seacoast waterways  
Stroke  
Support of all the Public Health Service Agencies

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Hill Burton Program  
Indian Health Service  
Nobel Laureates  
World Health Assembly arena